

MORNING CMO REPORT

09.27.2017

FROM THE DESK OF:

Anthony P. Weiss, MD, Chief Medical Officer,
Associate Dean for Clinical Affairs,
Upstate University Hospital

UPSTATE
UNIVERSITY HOSPITAL

Flu Season 2017-18

[Applies to All Physicians](#)

State law requires everyone to get a vaccine or wear a mask when in 'any area where patients or visitors may be found', which includes hallways, bathrooms, and cafeterias. However, at Upstate, the Medical Staff bylaws dictate a higher standard: all credentialed medical providers who do not obtain the flu vaccine must have an approved medical exemption. Once the Department of Health announces we are in flu season, physicians and other credentialed medical providers have 72 hours to comply. Non-compliance may result in a suspension until the vaccine is documented as administered.

The flu shot will be available just prior to start of the Annual Medical Staff meeting on 10/17, as well as regularly scheduled clinics at both campuses and other Upstate sites. If you obtain your vaccine outside of Upstate, be sure to send your documentation to Employee Student Health by fax 315-464-5471, or by email (ESHealth@upstate.edu) to avoid possible adverse consequences.

Information on influenza , and a calendar of flu clinic dates and locations, are online at <http://www.upstate.edu/health/fluinfo.php>.

Gender Identity Education

[Applies of All Physicians](#)

Transgender people have become widely recognized as one group that faces significant barriers to equal, consistent, and high-quality health care. From instances of humiliation and degradation to outright refusals to provide care, many institutions – consciously or not – have made it very difficult for transgender people to receive respectful, knowledgeable treatment. The end result often has been disengagement from the health care system that results in poor health. Rather than enduring abuse and poor treatment, transgender people often simply do without health care. As a result of this disengagement, treatable medical conditions too often become emergency medical problems, a common situation in communities with suboptimal access to care.

Even when transgender people do receive medical treatment, their interactions with hospital staff – including physicians, nurses, allied health professionals, admitting and registration personnel, and security officers often result in negative experiences. Yet hospitals can readily prevent these problems, and create a welcoming environment for transgender patients, by implementing key education, policies, practices, and staff training.

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HIGH ADVISORY-High priority does not warrant immediate action but recipients should be aware.

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The following is a brief education on transgender health:

Definitions:

- Sex is a defined value of male, female or unknown. Biological or natal sex is based upon anatomical attributes that characterize biologic maleness or femaleness and is usually assigned at birth. A patient's sex is used on legal documents such as birth certificate, licenses, insurance cards and for demographic collection.
- Gender Identity is defined as a personal conception of oneself as male or female (or both or neither). People base their "preferred gender pronouns" on this gender expression. Gender expression is how a person behaves, dresses, and speaks to communicate gender.
- Transgender is a gender identity that differs from sex assigned at birth. A "trans man" is a female to male person. A "trans female" is a male to female person.
- Transsexual: A term used to describe a subset of transgender individuals who have transitioned to the opposite sex, often but not always through a combination of hormonal therapy and sexual reassignment surgery.
- Gender affirmation/transitioning is a process of changing social, physical, or legal characteristics for purposes of living in a desired gender.
- Gender dysphoria is when there is an internal conflict between assigned and desired gender.
- When assigned sex and preferred gender are the same the person is cisgender; when sex and gender are different, the person is transgender.
- Statistics and facts:
 - > 50% of transgender teens attempt suicide.
 - > There are between 700,000 to 850,000 people who identify as transgender (~0.3%) in the United States.

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- > In January 2016 state-wide regulations prohibiting harassment and discrimination on the basis of gender identity, transgender status or gender dysphoria became law.
- > Upstate is fully committed to complying with these regulations with the goal of improving the care we provide to our transgender patients.

What does this mean for me?

- If a 'preferred name' is documented, refer to the patient by their preferred name.
- If a 'preferred pronoun' (he, she or they) is documented or requested, make all attempts to utilize this.
- If you have any confusion just respectfully request clarification. If mistakes are made a simple apology goes a long way.
- When two identifiers are required, legal name and date of birth should be used, not sex.

Online training module:

<http://transhealth.ucsf.edu/video/story.html>

<https://www.youtube.com/watch?v=YQAFYy15N7E>

Specialty Unit of the Year

[Applies to All Physicians](#)

Congratulations on the Transitional Care Unit (TCU) at University Hospital Community Campus on being selected as the Specialty Facility of the Year in Central NY! The TCU will be spotlighted in the HealthCare Provider and The Business Journal. This award recognizes our region's top healthcare industry leaders, innovators, and companies. They acknowledge those who have a significant impact on the quality of health care and services in Central New York.

Thank you for your outstanding team work and dedication to our patients!

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Outstanding Physician Comments

[Applies to All Physicians](#)

Each week we receive written comments from our patients regarding the care we provide within the Hospital. Below are this week's comments from grateful patients receiving care on the units and clinics at Upstate:

Emergency Department – Dr. Yang – very nice.

Emergency Department at Community – Dr. Camille Halfman was very patient with me and provided me with excellent care. She described the procedure in detail to me and, made me aware of what she was doing.

Dr. Halfmon was very professional and thoughtful!

2E – Dr. Marziale is wonderful!

6th Floor - Dr. Damron - very good.

Medicine - Dr. Migliore was a great doctor!

Dental - Dr. Smith is excellent. I was in an accident recently and he performed surgery on me while I was in the hospital. He is caring, listens and does what he says he is going to. I would recommend him to anyone and feel he is an asset to University Hospital and the community.

Adult Medicine- Dr. Farah is very attentive, takes whatever time necessary to be thorough and answer questions, and has a great sense of humor.

University Cardiology- I love **Dr. Michel** - he is thorough, takes time to explain your health issues making sure you fully understand. He goes above and beyond displaying patience to listen to the patient concerns and/or questions; always responding in a manner easy to relate to. In addition, he recommends reading material in order to get a better grasp of your illness.

Medicine Subspecialties – I love that **Dr. Yu** takes the time to listen and consider my concerns and opinions when deciding my treatment and that she truly cares.

Dr. Perl was great explained everything and really listened to my concerns

UHCC Neurology – My total experience with **Dr. Sanders** was a professional and positive one.

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Dr. Sakonju totally rocks! She gets kids, is super smart, and is very forward thinking with my teenage son.

Dr. Duleep very knowledgeable and very personable.

Dr. Duleep is like family that's how she makes you feel. she is tender, compassionate, and loving, the visit is long but you know when she gets to you she will make you feel you are her only patient that day.

Joslin – Dr. Weinstock is the best physician I have ever had!

Dr. Izquierdo is of the absolute highest level of competence professionally and personally.

Dr. Stred is an amazing physician.

Dr. Weinstock always impresses me with her knowledge, concern for me and her expertise I have always felt that **Dr. Hopkins** has taken a personal concern in my condition and my treatment plan which has successfully controlled my condition

Dr. Weinstock - Very caring and thorough

Upstate Urology – Dr. Ferry was very compassionate and thorough in my treatment.

Dr. Ginzburg impressed me as very smart and knowledgeable as well as inspiring confidence.

Dr. Bratslavsky is the most caring doctor I have ever had.

Dr. Bratslavsky himself. Besides being a very talented surgeon, he truly does care about his patients as people, their well-being and treats them as equals.

University Internists – My experience was very positive. **Dr. Krenzer** is very professional, accessible and easy to talk with.

Dr Krenzer is great.

Dr. Krenzer is an excellent doctor and has taking care of me for over 35 years. I truly trust her care!

Dr. Swarnkar is a great and very compassionate doctor.

Always appreciate **Dr. Frechette's** expertise and compassion

Dr. Krenzer is so kind, caring, respectful and very professional. I have been going to her for almost 30 years. I think she is the best doctor I have ever gone to in my whole life.

Family Medicine – I feel **Dr. Heather Finn** always has our best interest at heart. You feel she genuinely cares. You never feel like she is rushing with you. Like her very much.

Dr. Greenwald is an outstanding, very caring and excellent medical doctor. I trust him and feel very fortunate (blessed!) to have him as my GP.

Dr. Heather Finn. Great Dr.

Dr. Heather Finn. She is thoughtful and caring about my health problems.

I am always pleased with my visits. **Dr. Nanavati** is the best!

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Dr. Finn is a very kind, caring and compassionate physician. She engages me and asks how I feel about specific information, and checks on my emotional health as well as the physical. She always informs me of side effects and potential symptoms that I need to be aware of. I consider her to be an excellent physician.

Dr. Finn is terrific!

Dr. Nanavati is the best!

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Influenza (Flu) Vaccine (Inactivated or Recombinant): *What you need to know*

Many Vaccine Information Statements are available in Spanish and other languages. See www.immunize.org/vis

Hojas de información sobre vacunas están disponibles en español y en muchos otros idiomas. Visite www.immunize.org/vis

1 Why get vaccinated?

Influenza (“flu”) is a contagious disease that spreads around the United States every year, usually between October and May.

Flu is caused by influenza viruses, and is spread mainly by coughing, sneezing, and close contact.

Anyone can get flu. Flu strikes suddenly and can last several days. Symptoms vary by age, but can include:

- fever/chills
- sore throat
- muscle aches
- fatigue
- cough
- headache
- runny or stuffy nose

Flu can also lead to pneumonia and blood infections, and cause diarrhea and seizures in children. If you have a medical condition, such as heart or lung disease, flu can make it worse.

Flu is more dangerous for some people. Infants and young children, people 65 years of age and older, pregnant women, and people with certain health conditions or a weakened immune system are at greatest risk.

Each year **thousands of people in the United States die from flu**, and many more are hospitalized.

Flu vaccine can:

- keep you from getting flu,
- make flu less severe if you do get it, and
- keep you from spreading flu to your family and other people.

2 Inactivated and recombinant flu vaccines

A dose of flu vaccine is recommended every flu season. Children 6 months through 8 years of age may need two doses during the same flu season. Everyone else needs only one dose each flu season.

Some inactivated flu vaccines contain a very small amount of a mercury-based preservative called thimerosal. Studies have not shown thimerosal in vaccines to be harmful, but flu vaccines that do not contain thimerosal are available.

There is no live flu virus in flu shots. **They cannot cause the flu.**

There are many flu viruses, and they are always changing. Each year a new flu vaccine is made to protect against three or four viruses that are likely to cause disease in the upcoming flu season. But even when the vaccine doesn’t exactly match these viruses, it may still provide some protection.

Flu vaccine cannot prevent:

- flu that is caused by a virus not covered by the vaccine, or
- illnesses that look like flu but are not.

It takes about 2 weeks for protection to develop after vaccination, and protection lasts through the flu season.

3 Some people should not get this vaccine

Tell the person who is giving you the vaccine:

- **If you have any severe, life-threatening allergies.**

If you ever had a life-threatening allergic reaction after a dose of flu vaccine, or have a severe allergy to any part of this vaccine, you may be advised not to get vaccinated. Most, but not all, types of flu vaccine contain a small amount of egg protein.

- **If you ever had Guillain-Barré Syndrome (also called GBS).**

Some people with a history of GBS should not get this vaccine. This should be discussed with your doctor.

- **If you are not feeling well.**

It is usually okay to get flu vaccine when you have a mild illness, but you might be asked to come back when you feel better.



4 Risks of a vaccine reaction

With any medicine, including vaccines, there is a chance of reactions. These are usually mild and go away on their own, but serious reactions are also possible.

Most people who get a flu shot do not have any problems with it.

Minor problems following a flu shot include:

- soreness, redness, or swelling where the shot was given
- hoarseness
- sore, red or itchy eyes
- cough
- fever
- aches
- headache
- itching
- fatigue

If these problems occur, they usually begin soon after the shot and last 1 or 2 days.

More serious problems following a flu shot can include the following:

- There may be a small increased risk of Guillain-Barré Syndrome (GBS) after inactivated flu vaccine. This risk has been estimated at 1 or 2 additional cases per million people vaccinated. This is much lower than the risk of severe complications from flu, which can be prevented by flu vaccine.
- Young children who get the flu shot along with pneumococcal vaccine (PCV13) and/or DTaP vaccine at the same time might be slightly more likely to have a seizure caused by fever. Ask your doctor for more information. Tell your doctor if a child who is getting flu vaccine has ever had a seizure.

Problems that could happen after any injected vaccine:

- People sometimes faint after a medical procedure, including vaccination. Sitting or lying down for about 15 minutes can help prevent fainting, and injuries caused by a fall. Tell your doctor if you feel dizzy, or have vision changes or ringing in the ears.
- Some people get severe pain in the shoulder and have difficulty moving the arm where a shot was given. This happens very rarely.
- Any medication can cause a severe allergic reaction. Such reactions from a vaccine are very rare, estimated at about 1 in a million doses, and would happen within a few minutes to a few hours after the vaccination.

As with any medicine, there is a very remote chance of a vaccine causing a serious injury or death.

The safety of vaccines is always being monitored. For more information, visit: www.cdc.gov/vaccinesafety/

5 What if there is a serious reaction?

What should I look for?

- Look for anything that concerns you, such as signs of a severe allergic reaction, very high fever, or unusual behavior.

Signs of a severe allergic reaction can include hives, swelling of the face and throat, difficulty breathing, a fast heartbeat, dizziness, and weakness. These would start a few minutes to a few hours after the vaccination.

What should I do?

- If you think it is a severe allergic reaction or other emergency that can't wait, call 9-1-1 and get the person to the nearest hospital. Otherwise, call your doctor.
- Reactions should be reported to the Vaccine Adverse Event Reporting System (VAERS). Your doctor should file this report, or you can do it yourself through the VAERS web site at www.vaers.hhs.gov, or by calling **1-800-822-7967**.

VAERS does not give medical advice.

6 The National Vaccine Injury Compensation Program

The National Vaccine Injury Compensation Program (VICP) is a federal program that was created to compensate people who may have been injured by certain vaccines.

Persons who believe they may have been injured by a vaccine can learn about the program and about filing a claim by calling **1-800-338-2382** or visiting the VICP website at www.hrsa.gov/vaccinecompensation. There is a time limit to file a claim for compensation.

7 How can I learn more?

- Ask your healthcare provider. He or she can give you the vaccine package insert or suggest other sources of information.
- Call your local or state health department.
- Contact the Centers for Disease Control and Prevention (CDC):
 - Call **1-800-232-4636 (1-800-CDC-INFO)** or
 - Visit CDC's website at www.cdc.gov/flu

Vaccine Information Statement
Inactivated Influenza Vaccine

08/07/2015

42 U.S.C. § 300aa-26

Office Use Only



Influenza Vaccination

Frequently Asked Questions

1. What viruses will the 2017-2018 flu vaccines protect against?

2017-18 flu vaccine is similar to 2016-17 except for one change in flu A H1. The vaccine used is quadrivalent and is composed of:

A/Michigan/45/2015 (H1N1) pdm09-like virus (**new**)

A/Hong Kong/4801/2014 (H3N2)-like virus

B/Brisbane/60/2008-like (B/Victoria lineage) virus

B/Phuket/3073/2013-like (B/Yamagata lineage) virus

2. Is the vaccine a live vaccine?

No. There is no live flu virus in the flu shot.

3. Can I get the flu from the flu shot?

No. The flu shot cannot cause the flu.

4. Is there thimerosal (a mercury-based preservative) in this vaccine?

No. This vaccine is thimerosal-free.

5. If I have an allergy to eggs can I get a flu shot?

Persons whose allergy involves only hives without other symptoms may receive a flu shot. Persons with a severe allergic reaction (e.g. anaphylaxis) to a vaccine component or following a prior dose of a flu shot should not receive this flu shot.

6. Is it necessary to wear gloves when administering vaccinations?

No. OSHA regulations do not require the wearing of gloves when administering vaccinations, unless the person administering the vaccine is likely to come in contact with potentially infectious body fluids or has an open lesion on their hand. If a healthcare worker chooses to wear gloves, he or she must change them between each patient encounter.

7. Can I get a flu shot if I presently have a cold or upper respiratory infection?

Yes. The flu shot will not affect your current illness. Persons with moderate to severe illness should defer getting the flu shot until they are feeling better. Attention to proper hand hygiene is vital to limit the transmission of infections between people.

8. How long will it take until I am protected from the flu after the vaccine?

It usually takes about 2 weeks before full protection is mounted against the flu viruses. Therefore, the best time to get a flu shot is before flu virus is being spread in the community.

9. How long will I be protected from the flu after getting a flu shot?

Although immunity obtained from the vaccination can vary by person, previously published studies suggest that immunity lasts through a full flu season for most people.

References:

Centers for Disease Control (CDC)
New York State Department of Health (NYSDOH)
Advisory Committee on Immunization Practices (ACIP)
Occupational Safety and Health Administration (OSHA)